HIGH-RISK ACTIVITIES WORKSHEET				DATE
I. INDIVIDUAL DATA INFORMATION (To be filled in by the individual and sent to Commander)				
GRADE/NAME (Last, First, Mid	<u> </u>		NIT/OFFICE SYMBOL	DUTY PHONE
	·			
LIST HIGH RISK ACTIVITIES (Flying civilian aircraft, hang gliding, sky diving, parasailing, white water rafting, motorcycle and auto racing, scuba diving, bungee				
jumping, and other similar activities)				
DATE OF LAST PARTICIPATION (If applicable) FREQUENCY OF PARTICIPATION				
DATE OF LAST FARTICIFATIO	л (п аррисаше)		EKLY MONTHLY SEASONAL	OCCASIONAL
IDENTIFY PREVIOUS EXPERIE	NCE			
IDENTIFY SPECIALIZED TRAIN	IING REQUIRED/COMPLETED FOR TH	IS ACTIVITY	LOCATION/AREA WHERE ACTIVITY WILL	OCCUR (i.e. business, location,
			name, address & phone number)	
II. COMMANDEDIO DE VENVAND PRIFERIO OFOTIONI				
II. COMMANDER'S REVIEW AND BRIEFING SECTION BRIEFING INSTRUCTIONS. Commanders should discuss training, experience, use of safety equipment, rules, and precautions with personnel				
participating in high-risk a	ctivities. This risk assessment i	is not intend	led to prohibit personnel from participati	ng in high-risk activities, but to
			activities. Commanders should ensure	
in high-risk activities use appropriate safety measures. If commanders determine these personnel are inadequately trained or inexperienced and (or) a threat to safety and the mission exists, they must prohibit these personnel from participating in the activity. However, the				
commander's role in safety does not replace the individual's responsibility. The individual must exercise sound judgment and self-discipline				
and not put life, limb, or the performance of his or her Air Force duties in jeopardy.				
PRECONDITIONS AGREED UPON DURING BRIEFING (i.e., specific location, special equipment, medical screening)				
HAZARDS OF THE ACTIVITY (List them)				
SIGNATURE OF MEMBER				DATE
<u></u>	SIGNATURE OF COMMANDER			DATE
APPROVED	S. S.W. T. ST.E. ST. GOWNINANDER			2.116
DISAPPROVED				